

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>1/10</i>	<i>1333</i>	
O.I.P.E. CLASSIFIER			<i>5/10/77</i>
FORMALITY REVIEW	<i>1/10</i>	<i>1333</i>	<i>1-5-77</i>

INDEX OF CLAIMS

✓ Rejected N
 □ Allowed I
 - (Through numeral) Canceled A
 + Restricted O

10/437,007

Claim	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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